

HOUSE BILL No. 1300

DIGEST OF HB 1300 (Updated February 18, 2009 11:14 am - DI 97)

Citations Affected: Noncode.

Synopsis: Health provider patient limit study. Requires the health finance commission to study health plan provider contract provisions that would require a contracted provider to accept more than a certain number of patients. Requires the health finance commission to report its findings and recommendations to the legislative council before November 1, 2009.

Effective: Upon passage.

Welch, Brown C, Brown T, Dodge

January 13, 2009, read first time and referred to Committee on Insurance. February 19, 2009, amended, reported — Do Pass.





First Regular Session 116th General Assembly (2009)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in this style type, and deletions will appear in this style type.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or *this style type* reconciles conflicts between statutes enacted by the 2008 Regular Session of the General Assembly.

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HOUSE BILL No. 1300

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A BILL FOR AN ACT concerning insurance.

Be it enacted by the General Assembly of the State of Indiana:

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SECTION 1. [EFFECTIVE UPON PASSAGE] (a) The health
finance commission established by IC 2-5-23-3 shall, during the
2009 interim, study:

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- (1) the effect on insurers, health care providers, insureds, and other patients of a provision in an agreement with a provider under IC 27-8-11-3 requiring the provider to accept as patients more insureds than:
 - (A) the number of insureds specified in the agreement; or (B) if there is not a number of insureds specified in the agreement, the number that, in the provider's professional judgment, is the greatest number of insureds that the provider is able to accept without endangering the provider's patients' access to or continuity of care;
- (2) the effect on health maintenance organizations, participating providers, enrollees, and other patients of a provision in a contract between a health maintenance organization and a participating provider requiring the

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COMMITTEE REPORT

Mr. Speaker: Your Committee on Insurance, to which was referred House Bill 1300, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Delete the title and insert the following:

A BILL FOR AN ACT concerning insurance.

Delete everything after the enacting clause and insert the following:

(SEE TEXT OF BILL)

and when so amended that said bill do pass.

(Reference is to HB 1300 as introduced.)

FRY, Chair

Committee Vote: yeas 8, nays 0.





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